MAXIMUS Federal Services

Case Number:	CM14-0128857		
Date Assigned:	08/18/2014	Date of Injury:	11/30/2009
Decision Date:	09/11/2014	UR Denial Date:	08/12/2014
Priority:	Standard	Application Received:	08/13/2014

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Board Certified in Family Medicine, and is licensed to practice in Ohio. He/she has been in active clinical practice for more than five years and is currently working at least 24 hours a week in active practice. The expert reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

The injured worker is a 48-year-old male with a date of injury of November 30th of 2009. He currently experiences severe neck pain radiating to the upper extremities and severe back pain radiating to the lower extremities. He has had back surgery in July 2010 and again in March 2011. His diagnoses include cervical radiculopathy, lumbar radiculopathy, obesity, dyslipidemia, hypertension, and possible sleep apnea (although a formal sleep study does not appear to have been done yet). He has severe limitations with regard to his activities of daily living and is deriving little benefit from his pain medication. The treating physician feels that the injured worker's weight should be reduced to a reasonable level and hence is requesting authorization for a bariatric surgery consultation for consideration of bariatric surgery.

IMR ISSUES, DECISIONS AND RATIONALES

The Final Determination was based on decisions for the disputed items/services set forth below:

A bariatric consultation and consideration for bariatric surgery to reduce his weight to a reasonable level: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation American college of physicians "Snow V, Barry, Fitterman N, Qaseem A, Weiss K. Pharmacologic and surgical management of obesity in primary care: a clinical practice guideline from the American college of physicians. Ann Intern Med 2005 Apr 5; 142 (7): 525-31.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American Family Physician: October 1, 2011. Treatment of Adult Obesity With Bariatric Surgery.

Decision rationale: The most widely cited criteria and prerequisites for bariatric surgery come from the [redacted]. The [redacted] has set patient criteria for weight loss surgery which states that eligible patient should have a body mass index of 40 or higher or a body mass index of at least 35 with comorbidities such as diabetes, sleep apnea, heart disease, or hypertension. Additionally, eligible patients must have also attempted and failed the previous weight loss efforts, a five year history of weight parameters should be available, patients need to pass a psychiatric evaluation and undergoing nutritional evaluation to be recommended for weight loss surgery. In this instance, we are given very little information regarding the injured worker's weight history as it pertains to weight gain since his injury, there are no documented attempts at weight loss efforts previously, and there does not appear to be any kind of nutritional evaluation having been performed. While the injured worker certainly appears to have morbid obesity and a body mass index exceeding 40 with potential comorbidities, the prerequisite steps do not appear to have been taken. Therefore, the request for A bariatric consultation and consideration for bariatric surgery to reduce his weight to a reasonable level is not medically necessary or appropriate.